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## BIB DATA SHEET

CONFIRMATION NO. 6308

<b>SERIAL NUMBER</b> 10/528,783	<b>FILING or 371(c) DATE</b> 04/21/2005 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 1641	<b>ATTORNEY DOCKET NO.</b> 05/063		
<b>APPLICANTS</b> Hans Schreier, Neuss, GERMANY; Wolfgang Greb, Dusseldorf, GERMANY; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/DE03/03186 09/24/2003 <b>** FOREIGN APPLICATIONS *****</b> GERMANY 102 45 508.2 09/27/2002 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b>						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged // <u>                    </u> Examiner's Signature		<input type="checkbox"/> Met after Allowance <u>                    </u> Initials	<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWINGS</b> 0	<b>TOTAL CLAIMS</b> 6	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> GUDRUN E. HUCKETT DRAUDT SCHUBERTSTR. 15A WUPPERTAL, 42289 GERMANY						
<b>TITLE</b> Medicament/dosimeter combination packaging						
<b>FILING FEE RECEIVED</b> 515	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			